

## LOGAN TOWNSHIP

### POLICE DEPARTMENT

100 CHIEF LOGAN CIRCLE, ALTOONA, PA 16602-4337 PHONE: 814-949-3364 FAX: 814-949-3351 email: ltpd@atlanticbbn.net

RON HELLER CHIEF OF POLICE

# TRANSIENT MERCHANT LICENSE DOOR TO DOOR OR TELEPHONE SALES

Persons and firms planning to conduct a direct sales, door-to-door business in the Township of Logan, shall make official application to do so when such business transaction shall be considered as soliciting of orders, vending, peddling, and hawking.

An applicant shall submit to Logan Township the information required in accordance with Logan Township's Code of Ordinances "The Regulation and Licensing of Transient Retail Merchants", Chaper 13 § 304, together with a non-refundable license fee established by the Township from time to time. Said application shall not become effective for at least forty-eight (48) hours for one license application or at least seven (7) days for two or more license applications submitted during which time said applicant will or will not be cleared by investigation. The license must be renewed on the first day of each successive month and pay the appropriate fee to continue in operation. Applicants that pay for a yearly license must also renew this application on the first day of each successive month to continue in operation. Any violation of said ordinance will result in revocation of license. Authorized hours 10:00 A.M. to 7:00 P.M. Monday through Saturday

#### PLEASE COMPLETE IN DETAIL

Date of Application:				
Full Name				
Home Address				
Local Address				
Telephone No.		Cell Phone No  Driver's License No. and State		
Social Security No.				
Sex Race	Height	Weight	Hair	Eyes
HAVE YOU EVER BEEN C	ONVICTED OF A CRIME O	THER THAN A SUMM	MARY? Yes	No
(Including any felony, misde	emeanor, crime of theft, and	or theft by deception o	charges)	
If yes, give details and local	tion. When	Whe	ere	
Offense				
Firm or Business Name				
Business Address				
Local Address				
Local Telephone				
Type of Business (describe fu	lly -nature of goods, wares or merc	chandise offered or intended	i to be offered for sale).	

### Logan Township Transient Merchant License Door to Door or Telephone Sales

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Bank References Make, model, color of vehicle to be used\_\_\_\_\_ License Plate No. \_\_\_\_\_ State Issued \_\_\_\_\_\_ Names and addresses of persons working with you \_\_\_\_\_\_ By Signing this document, you give the Logan Township Police Department permission to search the AOPC and the PA State Police Criminal History Depository to investigate/search your criminal history. Applicant shall agree to furnish a photograph or be photographed and/or submit to fingerprinting by the Logan Township Police Department. I verify that I am the applicant as designated herein and that the facts and statements contained in this application are true and correct to the best of my knowledge. I understand that any false statements are made subject to the Penalties of 18 Pa. C.S. § 4904, relating to unsworn falsification to authorities. Parent's Consent (if under eighteen years of age) Parent - Print Name Parent - Signature Applicant's Signature For Police Department Use Only: Date Application Submitted:\_\_\_\_ Total Number of Applications Submitted:\_\_\_\_\_ Photograph Taken by LTPD Photograph Needed Date Criminal History Completed: By: APPROVED Date:\_\_\_\_\_ DENIED Reason:\_\_\_\_\_